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Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

USDC CLERK, GREENVILLE SO

# UNITED STATES DISTRICT COURT PM 1: 22

for the

District of South Caroling

Anderson Green Division

Case No.

8:19-CV-01402-RBH-JDA

(to be filled in by the Clerk's Office)

BobbyThompson

Plaintiff(s.

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

SCOTTLEWIS -V-WARDEN

SCOTTLEWIS -V-WARDEN

CUARTIS EARLEY - ASSOCIATE WARDEN

FILICIA OGUNSINE - CASE MANAGER

CIAYTON HOLDROOK - CASE WORKER

AMY R.ENLOE - NURSE PRACTITION

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

## **AMENDED**

#### COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

#### NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

## I. The Parties to This Complaint

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Bobby emir Thompson
All other names by which	
you have been known:	Bobby emir Thompson
ID Number	197011
Current Institution	Perry correction alinstitution
Address	430, OAKLAWN ROAd
	Pelzer S-C- 29699
	City State Zip Code

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. I	
Name	AM/ ENLOE
Job or Title (if known)	NURSE PRACTITIONER
Shield Number	NA
Employer	South Carolina department of correction
Address	430 OAKLAWN ROAD
	Pelzer, S.C. 29699
	City State Zip Code
	Individual capacity / Official capacity
Defendant No. 2	
Name	SCOTTLEWIS
Job or Title (if known)	WARDEN
Shield Number	NA
Employer	South Carolina Department of correction
Address	130 OAKLAWN ROAD
	Pelzer, S.C. 29699
	City State Zip Code
	Individual capacity Official capacity
	· · · · · ·

	_	
	Defendant No. 3	
	Name	curtis earley
	Job or Title (if known)	Associate warden of operations
	Shield Number	N/A
	Employer	430 OAKLAWN ROAD
	Address	South Carolina DEpartment of corrections
		Pelzer S.C. 29699  City State Zip Code
		Individual capacity 2 Official capacity
	Defendant No. 4	
	Name	Felicia Ogunsile.
	Job or Title (if known)	Classification Case Manager
	Shield Number	_ <i>N</i> /A
	Employer	SouthCarolinadepartment of correction
	Address	430,02KLZWN ROAD
		Pelzer S-C- 29699 City State Zip Code
		Individual capacity Official capacity
II.	Basis for Jurisdiction	
	immunities secured by the Constitution	tate or local officials for the "deprivation of any rights, privileges, or and [federal laws]." Under <i>Bivens v. Six Unknown Named Agents of</i> 388 (1971), you may sue federal officials for the violation of certain
	A. Are you bringing suit against (cl	heck all that apply):
	Federal officials (a Bivens	claim)
	State or local officials (a §	1983 claim)
700	the Constitution and Ifederal lay	ging the "deprivation of any rights, privileges, or immunities secured by ws]." 42 U.S.C. § 1983. If you are suing under section 1983, what y right(s) do you claim is/are being violated by state or local officials?  OF THE IHTH AMENDMENT Prohibits a state from fe, Liberty or property without due process of the rocess amounts to the fact that prison must sount of Protection/Like a hearing or notice to mething that harms my life.

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

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Additional Page;

Defendent NO: 5.

NAME. Clayton Holbrook

Job or Title. Classification case worker.

Shield Number, NA

EMPLOYER. South carolina department of correction

Address. 430 Oaklawn Road.

Pelzer. S.C. 29699

Windividual capacity

"UNDER COLOR OF STATE LAW"

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	D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.
III.	Priso	ner Status
	Indica	ate whether you are a prisoner or other confined person as follows (check all that apply):  Pretrial detainee
		Civilly committed detainee
		Immigration detainee
	4	Convicted and sentenced state prisoner
		Convicted and sentenced federal prisoner
		Other (explain)
IV.	Staten	nent of Claim
		s briefly as possible the facts of your case. Describe how each defendant was personally involved in the
	further any ca	d wrongful action, along with the dates and locations of all relevant events. You may wish to include details such as the names of other persons involved in the events giving rise to your claims. Do not cite ses or statutes. If more than one claim is asserted, number each claim and write a short and plain ent of each claim in a separate paragraph. Attach additional pages if needed.
	Α.	If the events giving rise to your claim arose outside an institution, describe where and when they arose.
	В.	If the events giving rise to your claim arose in an institution, describe where and when they arose.
		W7

THE ENTIRE INCIDENT DIDOCCURE WHILE I'AM HOUSED AT THE PERRY CORRECTIONAL INST. IN THE RHU-DISCIPLINARY-SEGEGRAGATION UNIT FROM MARCH, 2019-UNTIL-TODAY-JUNE-2019

C. What date and approximate time did the events giving rise to your claim(s) occur?

EVERY WORKING DAY. SINCE I GOT HERE MARCH 2019

I HAVE COMPLAINED ABOUT MY SITUATION.

What are the facts underlying your claim(s)? (For example: What happened to you? Who did what?

Was anyone else involved? Who else saw what happened?)

INMATE: DARNEII HUDSON = 227328

ALBART KELLY # 277334

CIVIL RIGHTS AND Procedural due process
AS Well 25 my equal protection rights, the

Complaint indicates i am being treated differently

From the other inmates.

## V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did not receive. Constant back pain while sleeping on worn out Thin Tore up mattrass, that is placed on steel slabbe eye Trauma, due To constant ultra bright cell light. As well as nurse practitioner amy renders. Refusal to Adhere To The Doctors orders. Refusal to Adhere To The Doctors orders. Relateing To my special snack for my meds. And her Refusal To 13 sure skin Medication an soap.

#### VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

PLAINTIFF: IS SEEKING PUNITIVE DAMAGES FOR EVIL ANTENT.

AND VIOLATION OF CONSTITUTIONAL RIGHTS, BY THE DEFENDENTS. WHOM ALSO COMMITTED OBVIOUS Retaliation against me for this suit. Plaintiff seeks: In the amount of the season of the source of the source of the source of the source of the season of t

PLEASE 8: 10 or 1402-RBH-JDA pate Filed 06/21/19 Firty Number 14 Page 7 of 14 BASIS for Jurisdiction. Paragragh B. the states actions of placeing me in disciplinary segregation for absolutely No reason or, no charge in any form, nor in anyway relateing to any current charge, is in fact, harmful to my Life, by being here placed in Segregation. does not Allow me To earn goodtime credit. 2s i was allowed workeredit to perry c. 1. procedural before being transferred here to perry c. 1. procedural due process pas two parts: The first is what has been done to me that is written above. And the second is written below. 1 have been placed on (S.T. STATUS...e. Level) That Prohibits me from ulTilizingthe phone system. this phane system requires that my family ADD's money to the system, for me to contact ADD'S Money to the system. The home but due to the fact Perry, C. I. h. e. The warder classification manager, filicia ogunsile/and/case worker charlon holbrook, has placed me on 2.5.T. Level-STATUS. That prohibits me to use the phone thase funds are being negated from my phone account due to Deing liegated

Constitution Al rights, when I have not viorated

The reaccilations to be on the s.T. guy rules or regulations to be on the s.T. Level status I am not being treated under normal Level 31 AIUS - 1 11111 Conditions due to the status falsely placed On me- This STATUS-I.e. Levels according To The classification Manager/ogunsile/WARDing To The classification mining.

A/w. Curtis earley / caseworker Holbrook, s.T. STATE.

Beingchap. A/W. Curtis Exility Mark work Ker Holbrook, St. STATUS
With a disciplinary charge Being Charged attachod areen shoot.

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that also indicate. A mistake had been Made. 2n? under rules and SCDC. Policy was to be placed back into General Population i was never told about any program, nor. didi ever reguest any program, nor did i ever sign-up for Zny program. nor did i ever request this vard. dae to the VioLence i was involved in on Perry. C.1. in 2008, when i ARRIVED here in march. 2019. WARDen Lewis A/W. earley. classification manager againsile/case worker clayton holbrook. All indicated i would not be allowed to stay on this yard. plus is in fact. Very ill. And would prefer to be closer to her. At this point I have been on disciplinary segregation being subjected to constant lies, bogus charges, which i was again found not quilty. I have Loss the Chance to earn good time for work eredit. 25 well
25 allother privaleges Allowed to inmates whom are not on segregation. S.T. STATUS 2s : 2m. AND I SUBMITT TO The COURTS. That This Administration At Perry Cilis in fact "Under color of STATE LAW" ARE in fact Violateing the 14th Amendment and ARE intentionally harming my Life/Liberty/Andproperty Atypical and significant harm and hardship is Clearly being restablished by The Defendents.

ALL-UNDER COLOR STATE LAW.

#### VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

٩.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	Yes
	□ No
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
	Perry Correctional Institution, 430, Pelzer. S.C. 2969
3.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes
	□ No
	Do not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
	Yes
	□ No
	Do not know
	If yes, which claim(s)?

Medical And constitutional violations.

Request to staff is often times ignored to hinder complaints That Leads to suits.

That has been as yed to me for years
doe to severe sin condition

MAY The COURTS. please note: The
medical File's included: Plus Medical
fecords. That has already been submitted
To The courts- The ferry Correctional
institutional admin. stration. That includes

. WARDENSLEWISE SCOTT LEWIS

2. Associate WARDENE C. EARLEYE CURTIS EARLEY

3. Classification Manager F. ogunsile
4. Classification Case worker-C. holbrook

5. N. P. (AMY R. ENLOE). NURSE PRACTITIONER

in Their official/full Capacity, with Their
actions interfere with or violate my constitutionally
protected rights during the Results of the condition
and the illegal confinement that is worse than normal

than other inmates are treated.

MAY The courts Please recognize The FACT:

Plaintiff never stated that he has never received

Any charges or write-ups while in prison.

plaintiff clearly speaks about he has not giffen

any charges in a number of years. The defendants

are attempting to lie to the courts. Saring limplied

I have not ever gotten a charge in as, years.

JATE: 6/15/19 S/Bolokythompson #19701( Perry. C. 1, 430.0AK(Awa RD. Pelzer, S. C. 29699 B-X-16

Pro Se	14 (Re	v. 12/16)	Complaint for	Violation of	Civil	Rights	(Prisoner)

F		lf you	did	not	file	a	grievance:
---	--	--------	-----	-----	------	---	------------

1.	If there are any	reasons why y	bib uov	not file a	grievance	state them	here:
	if there are any	TOUSDIES WITH	y Ou ulu	not me a	gile vallee,	state them	11010.

Fileing MORE CARIEVANCES, ONLY CAUSED
MORE RETALIATION ON ME.

2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

I ALETZTED DEPUTY WATEDEN TONET GIENN

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

NONE.

(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

#### VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?

Yes

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

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A.		ve you filed other lawsuits in state or federal court dealing with the same facts involved in this on?
		Yes
	V	No
В.		our answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is re than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1.	Parties to the previous lawsuit
		Plaintiff(s)
		Defendant(s)
	2.	Court (if federal court, name the district; if state court, name the county and State)
	3.	Docket or index number
	4.	Name of Judge assigned to your case
	5.	Approximate date of filing lawsuit
	6.	Is the case still pending?
		Yes
		1 No
		If no, give the approximate date of disposition.
	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
C.		ve you filed other lawsuits in state or federal court otherwise relating to the conditions of your orisonment?

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		Yes
		No
D.		f your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is note than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1	. Parties to the previous lawsuit
		Plaintiff(s)
		Defendant(s)
	2	. Court (if federal court, name the district; if state court, name the county and State)
	3	. Docket or index number
	4	. Name of Judge assigned to your case
	5	. Approximate date of filing lawsuit
	6	
		Ves No
		INO
		If no, give the approximate date of disposition
	7	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

## IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### A. For Parties Without an Attorney

Signature of Plaintiff

Prison Address

B.

Printed Name of Plaintiff
Prison Identification #

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	PEIZER	>, C -	27499
	City	State	Zip Code
For Attorneys			
Date of signing:	VONE		
Signature of Attorney	NONE		
Printed Name of Attorney	NONE		
Bar Number	NONE		
Name of Law Firm	NONE		
Address	NONE		
	City	State	Zip Code
Telephone Number	NONE		
E-mail Address	NONE		